



Illinois Shines – New Approved Vendor Application (Proposed Changes)

Thank you for your interest in registering as an Approved Vendor in [the Illinois Shines Program](#)!

The following application is to be completed by [entities applying to become](#) new Approved Vendors. The application takes about 30 minutes to complete and must be finished in one sitting as progress cannot be saved. Once an application is submitted, it will be reviewed by [the Program Administrators](#) within 4 to 6 weeks, and you will be contacted if any further information is required. [Please know that you are required to respond to any requests for additional or clarifying information by the Program Administrator within 14 days. Any failure to respond within this timeframe may result in the rejection of your AV application and prevent you from re-applying for a period of six \(6\) months.](#)

In order to complete this application, you will need information in the following categories:

- Company background (ownership structure, contacts, EIN, shareholder list, service territories)
- Vendor classification and project types (affiliations with other Approved Vendors, [Designees](#), application types)
- Legal and regulatory information [and customer complaints](#) (history of sanctions, bankruptcy, audit findings, fraud, [customer](#) complaints)
- Equity Eligible Contractor *if applicable* (contact info, categories [in/under](#) which you seek EEC Certification)

Additionally, you will need [to submit](#) the following documents:

- Illinois Secretary of State Statement of Good Standing dated within the past 12 months
- Distributed Generation Installer Certification from the Illinois Commerce Commission [\(if the entity will install Distributed Generation solar projects\)](#)
- [Printout Documentation](#) of either PJM-GATS aggregator account or M-RETS account [ownership confirmation](#)
- [A representative sample of your company's marketing resources](#) (print, website, social media, etc.)
- [Equity Eligible Contractor \(EEC\) Attestation \(if applicable\)](#)

[You will also need to have submitted a Minimum Equity Standard Compliance Plan](#)
(<https://forms.office.com/r/58Z370sEz4>).

[These document requirements are fully described in Section 2 of the Illinois Shines Guidebook.](#)

Please reach out to admin@illinoisshines.com with any questions.

BACKGROUND AND CONTACT INFORMATION

What type of Approved Vendor Application is this?

- Application to become a new Approved Vendor
- Application to become a new Equity Eligible Contractor Approved Vendor

Legal Business Entity Name: _____

The approved vendor name must match the entity's legal name as reflected on its W-9 form

Does the company operate under another name? Enter the Doing Business As ("DBA") name. If this does not apply, enter N/A: _____

Primary place of business

Street Address _____

Apartment or Suite (If this does not apply, please use N/A) _____

City _____

State _____

Zip _____

Company phone _____

Points of Contact Responsible for the company's day-to-day interaction with the Program Administrator

Primary Contact Name _____

Primary Contact Title _____

Primary Contact Phone Number _____

Primary Contact Email _____

Additional points of contact are not required but are helpful for the Program Administrator's ability to communicate any issues to the Approved Vendor. Please provide contact information for up to three additional business representatives.

Secondary Contact Name _____

Secondary Contact Title _____

Secondary Contact Email _____

Secondary Contact Phone Number _____

Third Contact Name _____

Third Contact Title _____

Third Contact Email _____

Third Contact Phone Number _____

Fourth Contact Name _____

Fourth Contact Title _____

Fourth Contact Email _____

Fourth Contact Phone Number _____

Who should we contact for contracting questions? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for extensions? An extension refers to the extension of the Scheduled Energization Date under the REC Contract. Extensions are required if a project fails to energize within a certain amount of time after the REC Contracted is executed. More information can be found within each specific REC Contract: <https://illinoisabp.com/rec-contract/> Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for REC delivery notifications? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for Annual Reports? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for customer support? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for Community Solar subscriber verification (if applicable)? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for potential Program violations and disciplinary-related communications? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Who should we contact for project batching notifications? Please enter an email address. If this email address is not connected to a contact identified above, please also include the employee's full name, title, and work phone number.

Company Background **COMPANY INFORMATION**

Company ownership structure, including any affiliated businesses owned or partially owned by the company, ~~or~~ and any businesses that have ownership of all or part of the company. Please detail the ownership structure as far as needed to show ownership by natural persons. Please include middle name/initial for any natural person listed.

Employer Identification Number (EIN): _____

Enter a numerical response only

Is the company a legal entity?

- Yes
- No

Company Type

- Corporation
- General Partnership
- LLC
- LLP
- LP
- Non-profit
- Sole Proprietor

Current number of employees: _____

A list of company shareholders, owners, partners or proprietors with ownership interests ~~in excess of 5%~~ equal to or greater than 10% and the amount of their respective ownership interests. Please provide a home address for any natural person whose ownership stake is equal to or exceeds 10%.

As required by Section 1-75(c-20) of the Illinois Power Agency Act, please provide the demographic information of all owners of the company. For each of the following categories, please state the number of owners who identify as such:

- White: _____
- Black or African American: _____

- American Indian or Alaska Native: _____
- Asian American: _____
- Native Hawaiian or other Pacific Islander: _____
- Hispanic or Latino: _____
- Multiracial: _____
- Other: _____

Please select any of the following categories that apply to your business.

- Minority-owned Business Enterprise (MBE)
- Woman-owned Business Enterprise (WBE)
- Disabled-owned Business Enterprise
- Veteran-owned Business
- Small Business (based on the size standards used by the U.S. Small Business Administration; please visit <https://www.sba.gov/size-standards/index.html> for a web tool to determine eligibility)
- None
- Other (type a response): _____

Company State of Registration: _____

Other states where company is registered to do business: _____

Company's date of organization/incorporation in home state: _____

Is the company authorized to do business in Illinois?

- Yes
- No

~~Is-Does~~ the company engaged in installing/install (or intend to install) distributed generation projects in Illinois?

- Yes
- No

Does the company install (or intend to install) community solar projects in Illinois?

- Yes
- No

In which regions of Illinois do you primarily work/install projects?

- Northern
- Central

[Southern](#)

[Please identify the counties in your service area.](#)

[_____ \[drop down menu with all Illinois counties as options / can select multiple counties\]](#)

[Company Website \(Parent company website if \[applicant is a special purpose entity\]\(#\)\):](#)

[Please list all social media accounts associated with the proposed Approved Vendor:](#)

[VENDOR CLASSIFICATION AND PROJECT TYPES](#)

[Is this an application for a Single Project Approved Vendor? Will the company act as an Approved Vendor for more than one project?](#)

- [Yes](#)
- [No \(we plan to be a Single Project Approved Vendor\)](#)

[\(If yes is answered above, the following 3 questions are required\):](#)

[Project Type \(Community Solar or Distributed Generation\)](#)

[Project Size](#)

[Project Location](#)

[Are you or have you ever been a Designee registered with the Illinois Shines program?](#)

- [Yes](#)
- [No](#)

[Is the company an affiliate as defined in the Long Term Renewable Resources Procurement Plan of any other affiliated with any current or prospective Approved Vendor or Designee? current or intended Approved Vendor applicant? Please select "yes" if there is a current or prospective Approved Vendor or Designee:](#)

- [• That has a 10% or more ownership in the applicant company](#)
- [• That the applicant company has a 10% or more ownership interest in](#)
- [• That has a partner, officer, director, member or manager in common with the applicant company](#)
- [• That has a common parent company with the applicant company](#)

- [Yes](#)
- [No](#)

[Name\(s\) and Approved Vendor ID\(s\) of Affiliate Approved Vendors or Applicants If yes, provide a thorough explanation of the affiliate relationship including, but not limited to, the name\(s\) of the affiliated company, the relevant ownership percentages; and the full names, addresses and phone](#)

numbers of any partner, officer, director, manager or member in common. If any, include the Approved Vendor ID number and Designee ID number for any affiliated businesses.

Legal and Regulatory Information **COMPANY AND AFFILIATE HISTORY**

During the past ~~seven~~^{five} (7~~5~~⁵) years, has the business, or any affiliates (using the criteria above) of the ~~business~~applicant business engaged in operations in the U.S. related to energy, or any current or former owner (not including public shareholders), partner, director, officer, principal, or any person in a position involved in the administration of funds, or currently or formerly having the authority to sign, execute or approve contracts for the applicant business:

- Been sanctioned, disciplined or fined (or are currently under investigation by a regulatory body) or proposed for sanction relative related to any business or professional permit or license?
- Been ~~under suspensions~~suspended, debarment~~disqualified, or involuntarily removed from any local, state or federal governmental program?~~ voluntary exclusion or determined ineligible under any federal or state statutes? For the sake of this question, a governmental program is any program, fund, scheme, or benefit administered by or on behalf of any governmental authority.
- ~~Been proposed for suspension or debarment?~~
- Been suspended, cancelled, terminated or found non-responsible on any contract awarded by a state, local, or federal government or governmental body, or on a subcontract related to such a contract?, or had a surety called upon to complete an awarded contract?
- Had a surety called upon to complete an awarded contract?
- Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation for any business-related conduct?
- Been charged with a misdemeanor ~~or~~ felony, been indicted, been granted immunity, been convicted of a crime, been~~or~~ subject to a judgment, taken ~~or~~ a plea bargain, or entered into a settlement, related to alleged for:
 - i. Misappropriation (including theft or embezzlement) of funds or property; or
 - ~~ii. A criminal act that reflects adversely on the individual's honesty;~~
 - ~~iii. Actual loss to the company or other person; or~~
 - iv. F~~Dishonesty~~, fraud, deceit, or misrepresentation.

Note: The above does not include ~~minor misdemeanors like speeding or parking tickets and does not include~~ actions taken by former employees after leaving the employ of your company. Answering yes to the above question does not automatically disqualify an applicant from becoming an Approved Vendor. The Program Administrator will consider the relevant information on a case-by-case basis.

- None of these apply
- Yes, at least one of these applies

If yes, please provide an explanation of the issue(s), relevant dates, the entity or person(s) involved, any remedial or corrective action(s) taken, and the current status of the issue(s).

Within the last sevenfive (75) years, has the proposed Approved Vendor or any of its affiliates that are or were engaged in energy-related operations in the U.S. had any judgements filed against it ~~which~~that remain undischarged?

- Yes
- No

If yes, provide an explanation of the issue(s), relevant dates, the claimant's name, the amount of the judgment, and the current status of the issue(s).

Within the last seven (7) years, whether pending or closed, has the proposed Approved Vendor or any of its affiliates initiated or been the subject of any bankruptcy proceedings?

- Yes
- No

If yes, provide the Bankruptcy Code chapter number, the court name, and the docket number. Indicate the current status of the proceedings as "initiated," "pending," or "closed."

Within the last seven (7) years, has any owner with greater than 105% ownership or principal of the proposed Approved Vendor or any of its affiliates been the owner (with greater than 10% ownership) or a principal ~~(with 15% ownership)~~ in a company subject to any bankruptcy proceedings, whether or not closed, or that is currently in any bankruptcy proceeding pending?

- Yes
- No

If yes, provide the Bankruptcy Code chapter number, the court name, and the docket number. Indicate the current status of the proceedings as "initiated", "pending", or "closed."

During the past sevenfive (75) years, has the proposed Approved Vendor or any of its affiliates failed to file a tax return or fully pay taxes according to deadlines required by federal, state, or local laws in the amount of \$10,000 or more?

- Yes
- No

If yes, provide the taxing jurisdiction, the type of tax, the liability year(s), the tax liability amount the proposed Approved Vendor failed to file/pay, and the current status of the tax liability.

During the past sevenfive (75) years, has the proposed Approved Vendor or any of its affiliates that are or were engaged in operations in the U.S. related to energy been audited by any government entity resulting in a negative audit findings or requirement for remedial action?

- Yes
- No

If yes, provide an explanation of the issue(s) under investigation, relevant dates, the government entity involved, any remedial or corrective action(s) taken, and the current status of the issue(s).

During the past ~~five~~seven (75) years, has the proposed Approved Vendor or any of its affiliates that are or were engaged in operations in the U.S. related to energy been the subject of any judgments or settlement as the result of any investigation or action brought by a public consumer protection authority (including but not limited to a federal/local attorney general's office, consumer protection bureau, or other consumer protection entity) in any jurisdiction?

- Yes
- No

If yes, provide any remedial or corrective action(s) taken and current status of the issue(s).

During the past ~~five~~ seven (75) years, has the proposed Approved Vendor or any of its affiliates ~~that are or were engaged in operations in the U.S. related to energy been the subject of any unresolved~~ failed to resolve any Better Business Bureau complaints in any jurisdiction?

- Yes
- No

If yes, provide a summary of the complaint, a copy of the complaint, any remedial or corrective action(s) taken, and current status of the issue(s).

During the past ~~five~~seven (75) years, has the proposed Approved Vendor or any of its affiliates that are or were engaged in operations in the U.S. related to energy:

- been the subject of any judgment or settlement as the result of a lawsuits filed in a court of law, or
- ~~or formal~~ been the subject of a complaints filed in a court of law with a regulatory or administrative agency concerning allegeding fraud, deception or unfair marketing practices, ~~or~~ other similar allegations??

- Yes
- No

If yes, please identify the name, case number, and jurisdiction of each such lawsuit or complaint, any remedial or corrective action(s) taken, and the current status of the lawsuit or complaint.

During the past ~~seven~~five (75) years, has the proposed Approved Vendor or any of its affiliates that are or were engaged in operations in the U.S. related to energy been suspended from participation or

denied the ability to participate in a government or utility-administered renewable energy incentive program?

- Yes
- No

If yes, provide the name of the program and jurisdiction, an explanation of the issue(s), and the current status of the issue(s).

REQUIRED DOCUMENTS

Please email all of the ~~requested~~required documents below to admin@illinoisshines.com. ~~These are required for app applications.~~ If documents are not received, the application cannot move forward.

- Illinois Secretary of State Statement of Good Standing dated within the past 12 months
- Distributed Generation Installer Certification from the Illinois Commerce Commission (if ~~applicable~~the entity will install Distributed Generation solar projects)
- ~~Printout of~~Documentation of either PJM-GATS aggregator account or M-RETS account ~~ownership confirmation~~
- Equity Eligible Contractor (EEC) Attestation (if applicable)
- ~~Marketing Uploads:~~Samples of marketing materials: A representative sample related to solar installed under the Illinois Shines Program for each channel of marketing the company is engaged in (including, but not limited to: print, website, direct mail, direct email, web ads, social media, radio, telemarketing, billboards). If no marketing material is used, please upload a document on company letterhead stating that no marketing material is used with a brief explanation of customer acquisition methods absent the use of marketing.

Beginning in Program Year 2023-2024, at least 10% of the project workforce for each entity participating in the Illinois Shines/Adjustable Block Program must be composed of Equity Eligible Persons. With the exception of Equity Eligible Contractors (EECs), all Approved Vendors (AVs) and Designees participating in the 2023-2024 Adjustable Block Program are required to submit a **Minimum Equity Standard Compliance Plan**. Please visit the Equity Accountability System Hub on our website that provides helpful resources and tips for MES Compliance Plan submissions, along with a link to the submission form: <https://illinoisabp.com/equity-accountability-system/>

~~Additional Questions Not Used for Qualification~~ADDITIONAL QUESTIONS

Utility service territory(ies) in which you seek to operate (select all that apply)

- Ameren Illinois
- ComEd
- MidAmerican
- Mt. Carmel
- Municipal Utilities in MISO
- Municipal Utilities in PJM

[Rural Electric Cooperatives in MISO](#)

[Rural Electric Cooperatives in PJM](#)

~~Municipal Utility (select all that apply)~~

~~Muni in MISO~~

~~Muni in PJM~~

~~Rural Electric Cooperative (select all that apply)~~

~~Coop in MISO~~

~~Coop in PJM~~

Type of Approved Vendor (select all that apply)

- DG Installer
- DG Project Developer
- Community Solar Project Developer
- SREC Broker/Aggregator
- Non-profit
- Other

The ~~Illinois Shines Program~~ offers incentives across [six \(6\)](#) categories and the Program offers support through each of these categories broken out into the [following below](#) Sectors. As an AV, you will be assigned a Sector Strategist who will act as your main point of contact for any Program questions or needs. Your Strategist will also provide proactive Program updates, process guides, and training relevant to your sector to support your team with the resources necessary to succeed in the Program. Please select the Sector most relevant to your team, or the Sector you anticipate participating in the most.

- Small Distributed Generation
- Large Distributed Generation
- Community Solar (both Traditional and Community-Driven)
- Public Schools
- Equity Eligible Contractors

Do you intend to participate in the [Illinois Solar for All \(ILSFA\) Program](#)?

- Yes
- No

Do you consent to being contacted about solar job training programs in Illinois?

- Yes
- No

Do you have corporate hiring policies in place which do not allow for the hiring of individuals who have been convicted of a crime?

- Yes
- No

~~Do you want to be listed on the publicly available Approved Vendors list on the illinoisshines.com website?~~

~~Yes~~

~~No~~

~~Please list all social media accounts associated with the proposed Approved Vendor.~~

Attestations

I am the owner (for sole proprietorship), partner (for partnership) or the authorized agent (for corporation, LLC, or non-profit) of the proposed Approved Vendor [and have the authority to make the following attestations on behalf of the company applying herein to serve as an Approved Vendor in the Illinois Shines Program.](#)

- I agree

The information provided on this form is true and correct to the best of my knowledge

- I agree

I agree to participate in Program-related registration and any initial or recurrent required training.

- I agree

I agree to maintain registration to do business in Illinois [and will notify the Program Administrator without delay if the Approved Vendor's registration status with the Illinois Secretary of State changes.](#)

- I agree

[I agree to provide the Program Administrator with 30 days' advance notice of closing down my company's business operations in Illinois.](#)

I agree

I agree to provide [the Program Administrator with](#) updated information [\(on existing\) and information to the Administrator](#) on any [new](#) complaints, lawsuits, legal or regulatory action, bankruptcy, or any other material adverse changes in business condition when it becomes available.

I agree

I agree to provide [samples/copies](#) of [any](#) marketing materials ~~or content~~ used by [the Approved Vendor and/or its Designees](#) ~~our company, or our subcontractors/installers and affiliates, to the Program Administrator for review upon initial qualification as an Approved Vendor. In addition, I will provide copies of any marketing material~~ related to the sale, financing, or installation of solar photovoltaic systems that will apply to ~~participate in the Adjustable Block Program, or related to the Adjustable Block Program itself, or are related to the Illinois Shines Program~~ whenever requested by the IPA or Program Administrator. I furthermore agree to make changes to marketing materials requested by the IPA or Program Administrator in their efforts to ensure that such materials are not deceptive, confusing, or misleading, and to further ensure that such materials do not ~~feature misrepresentations/misrepresent about~~ our relationship to the Illinois Power Agency or the [Adjustable Block/ Illinois Shines](#) Program.

I agree

I agree to comply with all [Program requirements including, but not limited to,](#) consumer protection ~~guidelines~~[requirements](#) published by the Program Administrator and acknowledge that a failure to do so may jeopardize my ability to serve as an Approved Vendor in the program.

I agree

I agree to provide and maintain credit and collateral requirements pursuant to the Long-Term Renewable Resources Procurement Plan.

I agree

I agree to complete annual reports by the report deadline; ~~disclose~~[ing](#) names and other information ~~regarding~~[ing](#) installers and projects; ~~and document~~[ing](#) that all installers and other subcontractors comply with applicable local, state, and federal laws and regulations including ICC registration as Distributed Generation Installers; ~~provide~~[ing the](#) current status of unfinished projects and [Renewable Energy C](#)redits generated and delivered by completed projects; ~~and~~ [comply with](#) any other annual report requirements as determined by the [Program](#) Administrator.

I agree

I agree to comply with all community solar subscriber reporting requirements including providing updated and accurate subscriber data.

I agree

I agree that all information obtained related to a community solar subscriber's utility account that is confidential, proprietary or generally non-public, including the subscriber's utility account number, utility account name, and meter number, shall be maintained in a secure and confidential manner. I further agree that I will not release such information to any other person or entity, other than as

required for purposes of subscription enrollment and program administration, without the customer's written consent.

I agree

As required by Section 1-75(c)(1)(7) of the Illinois Power Agency Act (20 ILCS 3855), I agree that any photovoltaic projects submitted for program approval were or will be installed by a qualified person in compliance with Section 16-128A of the Public Utilities Act (220 ILCS 5) and any rules or regulations adopted thereunder, including Title 83, Section 468.20 of the Illinois Administrative Code.

I agree

I agree to provide company financial statements and/or project references upon request of the Program Administrator.

I agree

I will comply with ongoing Program [rules/requirements](#), terms and conditions, and [timely respond to Program Administrator requests](#).

I agree

[I agree to promptly provide updated contact information to the Program Administrator if any of the contact information included in this application changes.](#)

I agree

[I agree to promptly provide the Program Administrator with written notice if the ownership of the company changes by 50% or more after the filing of this application.](#)

I agree

[I agree to promptly provide the Program Administrator with written notice if the name of the Approved Vendor, including the legal name or the "doing business as" name, changes.](#)

I agree

[I agree to promptly provide the Program Administrator with written notice if there are any material changes to written answers in the Company and Affiliate History sections of this application.](#)

I agree

If any requirements are implemented by the Illinois Power Agency or Program Administrator that I am unable to comply with, I agree to immediately request to withdraw my qualification to act as an Approved Vendor for any projects not already under contract with the utilities and cease all new Approved Vendor activities.

I agree

[I agree to respond within fourteen \(14\) days to any requests for information or clarification from the Program Administrator related to my AV Application. I agree that if I fail to respond to any Program Administrator inquiry within 14 days, I will be deemed non-responsive which may result in the rejection](#)

of my application by the Program Administrator. I further agree that any such rejection for non-responsiveness may prevent me from being eligible to resubmit another AV Application for a period of six (6) months.

I agree

Please type the name of the individual agreeing to the above attestations. _____

Equity Eligible Contractor Application and Required Document

EEC certification for Approved Vendors occurs at the ownership/partner/proprietor level of a company (or board level in the case of non-profit organizations). This means that one or more owners of a company must qualify as an EEC under one of the qualifications listed below.

There are several ways to qualify as an EEC:

1. Persons who graduated from or are current or former participants in the Clean Jobs Workforce Network Program, the Clean Energy Contractor Incubator Program, the Illinois Climate Works Preapprenticeship Program, Returning Residents Clean Jobs Training Program, or the Clean Energy Primes Contractor Accelerator Program, and the solar training pipeline and multi-cultural jobs program created in paragraphs (a)(1) and (a)(3) of Section 16-108.21 of the Public Utilities Act;
2. Persons who are graduates of or currently enrolled in the foster care system;
3. Persons who were formerly incarcerated; or
4. Persons whose primary residence is in an equity investment eligible community. Eligible communities can be found on the maps linked here: <https://illinoisshines.com/become-an-equity-eligible-contractor-eec-approved-vendor-or-designee/>

Please submit the form below and e-mail a signed attestation to admin@illinoisshines.com and our team will begin processing your application. Please also send proof of eligibility if you are applying for the following categories:

- Persons whose primary residence is in an equity investment eligible community. Examples of proof of eligibility include a driver's license, utility bill, lease agreement, etc.
- Persons who graduated from or are current or former participants in the Clean Jobs Workforce Network Program, the Clean Energy Contractor Incubator Program, the Illinois Climate Works Preapprenticeship Program, Returning Residents Clean Jobs Training Program, or the Clean Energy Primes Contractor Accelerator Program, and the solar training pipeline and multi-cultural jobs program created in paragraphs (a)(1) and (a)(3) of Section 16-108.21 of the Public Utilities Act;

EEPs that currently serve as the majority-owner of an Equity Eligible Contractor may not submit additional requests to certify Equity Eligible Contractors for which they serve as the majority-owner EEP. However, this policy does not apply to Single-Project AVs, as the Agency recognizes the important role Single-Project AVs can play in successful financing of projects, and does not want to limit an EEP's ability to employ business practices available to non EEPs.

Link to required attestation: https://illinoisshines.com/wp-content/uploads/2023/07/ABP_Attestation_for_Eligible_Persons-1.pdf

Are you applying to become an EEC?

- Yes
- No

(If yes, the following questions are required)

Please designate which Owners, Partners, or Proprietors meet the EEC eligibility criteria.

Name of 1st person: _____

Name of 2nd person: _____

Name of 3rd person: _____

Select one or more of the following categories under which you seek Equity Eligible Contractor Certification

- Persons who graduated from or are current or former participants in the Clean Jobs Workforce Network Program, the Clean Energy Contractor Incubator Program, the Illinois Climate Works Pre apprenticeship Program, Returning Residents Clean Jobs Training Program, or the Clean Energy Primes Contractor Accelerator Program, and the solar training pipeline and multi-cultural jobs program created in paragraphs (a)(1) and (a)(3) of Section 16-108.21 of the Public Utilities Act;
- Persons who are graduates of or currently enrolled in the foster care system;
- Persons who were formerly incarcerated;
- Persons whose primary residence is in an equity investment eligible community

Do you wish to be identified as an Equity Eligible Contractor (EEC) in the list of Approved Vendors on the program website, illinoisshines.com?

- Yes
- No

Do you consider any information you provided confidential?

- Yes
- No